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REPORT OF RECEIPTS **AND DISBURSEMENTS**

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FURINI 3	For An Authorized Committee				Office Use Only			
I. NAME OF COMMITTEE (in full)	TYPE OR PRINT		kample: If typing, the lines.	ype 📱 121	FE4M5	N.E.		
Friends of Bernie San	ders					ı		
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DDRESS (number and street)	P.O. Box 391							
V		1 1 1 1 1	<u> </u>	an				
Check if different than previously reported. (ACC)	Burlington		in	⊥ Vr	05402	2		
. FEC IDENTIFICATION N	IUMBER ▼	CITY A		STATE	A	ZIP CODE		
C00411330	months and the second	3. IS THIS REPORT	X NEW (N) (OR	AMENDED (A)	STATE ▼ DISTRICT		
TYPE OF PEROPT (0)	O)	······································						
 TYPE OF REPORT (C) (a) Quarterly Reports: 	noose One)	(b) 12-Day PRI	E-Election Report f	or the:				
•		y come to	Primary (12P)	E. G	eneral (12G)	Runoff (12R)		
April 15 Quarterly	Report (Q1)		Convention (12C	n Fils	pecial (12S)			
X July 15 Quarterly	Report (Q2)		·					
October 15 Quarterly Report (Q3)		Election or	M M /	ng parag	inemateur de	in the State of		
January 31 Year-End Report (YE)		(c) 30-Day PO	ST-Election Report	for the:				
		.	General (30G)	R.	unoff (30R)	Special (30S)		
Termination Report (TER)		Election or	A M M M D D	, у у	COAL COAL	in the State of		
Covering Period	M / 0 0 0	9 9 9 1 2014 - Allen Austri	through	м м , в	30 / FY	Total Same of the		
certify that I have examined to	his Report and to t	he best of my k	nowledge and belie	ef it is true, coi	rect and con	nplete.		
ype or Print Name of Treasure	er Martha Abbott	- -						
ignature of Treasurer Ma	rtha Abbott			Date	M M J .	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
OTE: Submission of false, error	neous, or incomplete	information may	subject the person	signing this Re	port to the pe	nalties of 2 U.S.C. §437g.		
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